PTC/SB/06 (08-03)
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Under the Paperwork Re PATEN	I APPLICATIO	in lee de i	ERMINATIO	TO B COLLECTION OF	iniomalina ual	ess it disp	DEPARTMENT C lays a valid OMB nipp of Docket N	control numb
Substitute for Form PTO-875 /01 / 19 6								648
CLAIMS AS FILED - PAF (Cotumn 1)			Cotumn 2)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR NUMBER F		ED NUMBER EXTRA		RATE	FEE	1	RATE	FEE
BASIC FEE (37 GFR 1,16(a))				]	3	OR	10.10	\$
TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 =		20 = .				OR	x s_ =	-
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus	3 = '		x s =		OR		<b></b>
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))			1	<del>                                     </del>	1	X 3=		
* If the difference in column		<del> </del> -	OR	+5=				
	TOTAL		OR	TOTAL				
CLAIM	IS AS AMENDEI	) – PART II	•	•				
	olumn 1)	(Column 2)	(Column 3)	SMALL	ENTITY	OR	OTHER SMALL	
99 111 1 RE	CLAIMS MAINING AFTER	HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
S . Total	ENDMENT Minus	" 20	+=-/	<del></del>	- FEE		1	FEE
(37 CFR 1.16(cj) C Z Independent III (37 CFR 1.16(c))	2 Minus	3	<del>┤╌┤</del> ╌┤	× \$	<del> -\-</del>	OR	× s=	<del> </del>
W (3/04/1/48))	0	·	<del></del>	x s=	-	OR	x \$=	+
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,16(9))				+5 -		OR	+5=	
4				TOTAL ADD'L-FEE	لها	OR	ADD'L FEE	
1 / 1 6	LAIMS	(Column 2) HIGHEST	(Column 3)		<del></del>	1		'
	MAINING NFTER NDMENT	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total (37 CFR 1.15(c)) (37 CFR 1.15(c))	20 Minus	20		x sa26 =	\	OR	x 5 0.	
Independent (37 CFR 1,16(b))	Minus	3		x s 100 .		OR	x 80/00=	<del>                                     </del>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))				+ , 180=		OR	+.261	$\overline{}$
						OR	TOTAL ADD'L FEE	$\overline{}$
	lumn 1)	(Column 2)	(Cotumn 3)				_	
REN A	LAIMS MAINING FTER NDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
	Minus	··	-	,	FEE	}		FEE
Independent (SPOR 1,16(b))	Minus	•••	=	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		OR	× 5=	
FRST PRESENTATION	X \$=		OR	× 5=				
				TOTAL ADD'L FEE		OR L	TOTAL ADD'L FEE	
" If the entry in column 1 " If the "Highest Number " If the "Highest Number	Previously Paid For	IN THIS SPACE IN THIS SPACE	is less than 20, er is less than 3, ent	nter "20". er "3".			· · · · · ·	

The Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.